

Substitute for form 1449A/PTO				Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT				Application Number	10/583,464
(Use as many sheets as necessary)				Filing Date	January 16, 2007
				First Named Inventor	Rasappa G. Arumugham
				Art Unit	1648
				Examiner Name	Stuart Snyder
Sheet	1	of	1	Attorney Docket Number	050418-391414

U.S. PUBLISHED APPLICATIONS					
Examiner Initials*	Cite No. ¹	Document Number Number Kind Code ² if Known	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
119	US - 2002/0086847		07-04-2002	Chain	
120	US - 2003/0166558		09-04-2003	Frangione	

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	121	Restriction Requirement for U.S. Application No. 11/841,919, mailed December 10, 2010.	<input type="checkbox"/>
	122	Non-final Office Action for U.S. Application No. 11/841,919, mailed March 28, 2011.	<input type="checkbox"/>
	123	Non-final Office Action for U.S. Application No. 11/841,993, mailed July 13, 2009.	<input type="checkbox"/>
	124	Final Office Action for U.S. Application No. 11/841,993, mailed January 27, 2010.	<input type="checkbox"/>
	125	Restriction Requirement for U.S. Application No. 10/583,503, mailed January 6, 2009.	<input type="checkbox"/>
	126	Non-final Office Action for U.S. Application No. 10/583,503, mailed May 19, 2010.	<input type="checkbox"/>
	127	Final Office Action for U.S. Application No. 10/583,503, mailed January 28, 2011.	<input type="checkbox"/>

Examiner Signature	/Stuart Snyder/	Date Considered	11/02/2011
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¹EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

²Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached.